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SERIAL NUMBER 10/618,353	FILING OR 371(c) DATE 07/11/2003 RULE	CLASS 604	GROUP ART UNIT 3767	ATTORNEY DOCKET NO. F-5932
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APPLICANTS

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** CONTINUING DATA *****

This appln claims benefit of 60/402,286 08/09/2002

W 9/29/06

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED **

10/09/2003

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY BELGIUM	SHEETS DRAWING 4	TOTAL CLAIMS 11	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	<u>W</u> Examiner's Signature	<u>W</u> Initials			

ADDRESS

Baxter Healthcare Corporation
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TITLE

Needle protector

FILING FEE RECEIVED 1230	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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